## P17000028820

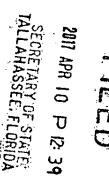
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PR 11 2017.

T. LEMIEUX



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: $\frac{17}{2}$	50 NE 191ST ST CORP				
DOCUMENT NUMBER: P17000					
The enclosed Articles of Amendmen					
Please return all correspondence cor	cerning this matter to the following:				
PAUL ENEA					
<del></del>	Name of Contact Person				
1750	NE 191ST ST CORP				
	Firm/ Company				
20 PINEWOO	DD ROAD				
	Address				
MANHASSE	T, NY 11030				
	City/ State and Zip Code				
FISH4THEGOLD@	©GMAIL.COM				
E-mail a	ddress: (to be used for future annual report notification)				
For further information concerning t	nis matter, please call:				
PAUL ENEA	at (516 ) 996-1483  Area Code & Daytime Telephone Number				
Name of Contact Per	Area Code & Daytime Telephone Number				
Enclosed is a check for the following	amount made payable to the Florida Department of State:				
	Filing Fee & Status   Status				
Mailing Address Amendment Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	ations Division of Corporations Clifton Building				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



1750 NE 191ST ST CORP (Name of Corporation as currently filed with the Horidal Debt) of Sale P17000028820 SECRETARY OF STATES
(Document Number of Corporation (MalachhASSEE, FLORIDA Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. nature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	RENEE ENEA	20 PINEWOOD ROAD
X Add			MANHASSET, NY 11030
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change	— <del>1.11.4 3 1 3 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 </del>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach addition	adding additional Articles, enter change(s' al sheets, if necessary). (Be specific)	<u>) nere</u> :	
	N/A		
			<u> </u>
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If an amandma	nt provides for an exchange, reclassification	m on agraphation of inqued change	
<u>provisio</u> ns for	implementing the amendment if not contain icable, indicate N/A)	ned in the amendment itself:	
(ң посарр	NA		
»			
<u> </u>			

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendmen	z statement t(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sh action was not required.	areholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareh action was not required.	older
Dated	
Signature for the signature	
(By a director, president or other officer – if directors or officers have n selected, by an incorporator – if in the hands of a receiver, trustee, or other properties.)	ot been
appointed fiduciary by that fiduciary)	nor court
Paul Enea	
(Typed or printed name of person signing)	
president	
(Title of person signing)	